There is a growing perception that modern medicine is approaching a state of crisis characterized by creative inertia, non-innovation, and non-productivity. Compared to the remarkable progress during the first 30 years after World War II, the last 30 years have been characterized by a self-congratulatory illusion of progress, the fruits of which have failed to reach our patients. The problem may lie with the fact that the (often lone) clinical innovator of the past who made all the difference to the spectacular progress of medicine during the golden age has been marginalized to the extent that he is now an endangered species. The two definable forces that have led to his alienation are the hegemony of molecular science and the primacy accorded to the randomized clinical trial in biomedical research. Both these stifle creative originality—the former by an over dependence on complex and technology-driven "big science" and a flawed founding philosophy, and the latter by putting limits on our intellectual expectations and a bureaucratic approach to scientific research.